

**FEE TRANSMITTAL**

Electronic Version v08

Stylesheet Version v08.0

**Title of  
Invention****STRUCTURE ANALYSIS AND DEFECT DETECTION SYSTEM**

Application Number :

Date :

First Named Applicant: John C. Tsai

Attorney Docket Number: 60617.301501

**TOTAL FEE AUTHORIZED \$ 520**

Patent fees are subject to annual revisions on or about October 1st of each year.

Filing as small entity

**BASIC FILING FEE**

| Fee Description                        | Fee Code | Amount \$ | Fee Paid \$ |
|--|----------|-----------|-------------|
| Utility Filing Fee                     | 2001     | 385       | 385         |
| Subtotal For Basic Filing Fees: \$ 385 |          |           |             |

**EXTRA CLAIM FEES**

| Fee Description                        | Extra Claims | Fee Code | Amount \$ | Fee Paid \$ |
|--|--------------|----------|-----------|-------------|
| Total Claims : 35                      | 15           | 2202     | 9         | 135         |
| Independent Claims : 2                 | 0            | 2201     | 43        | 0           |
| Subtotal For Extra Claims Fees: \$ 135 |              |          |           |             |

**AUTHORIZED BILLING INFORMATION**

The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit account number: 083240

Access Code \*\*\*\*\*

Deposit name: Intellectual Property Law Offices

Deposit authorized name: Raymond E. Roberts

Signature: RER60617.301501

Date (YYYYMMDD): 2003-11-12

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.

Adjustment date: 03/12/2004 BHARTW 10605994  
11/13/2003 EFSRQD 00000016 083240 10605994  
02 FC:2202 135.00 CR  
03/12/2004 BHARTW 00000003 083240 10605994  
01 FC:2202 135.00 DR

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10605994

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

|   |                 |              |
|---|-----------------|--------------|
| TOTAL CLAIMS  | 34              |              |
| FOR   | NUMBER FILED    | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 34 minus 20 = * | 14           |
| INDEPENDENT CLAIMS  | 2 minus 3 = *   | —            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |                 |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE ☐

OR OTHER THAN  
SMALL ENTITY

|           |        |
|-----------|--------|
| RATE      | FEE    |
| BASIC FEE | 385.00 |
| X\$ 9=    | 126    |
| X43=      |        |
| +145=     |        |
| TOTAL     | 511    |

|           |        |
|-----------|--------|
| RATE      | FEE    |
| BASIC FEE | 770.00 |
| X\$18=    |        |
| X86=      |        |
| +290=     |        |
| TOTAL     |        |

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

|             |   |   |       |   |                  |
|-------------|---|---|-------|---|------------------|
| AMENDMENT A |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|             | Total   | *   | Minus | **  | =                |
|             | Independent   | *   | Minus | ***   | =                |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |       |   |                  |

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

|                     |                        |
|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=              |                        |
| X43=                |                        |
| +145=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

OR

|                     |                        |
|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$18=              |                        |
| X86=                |                        |
| +290=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

(Column 1)

(Column 2)

(Column 3)

|             |   |   |       |   |                  |
|-------------|---|---|-------|---|------------------|
| AMENDMENT B |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|             | Total   | *   | Minus | **  | =                |
|             | Independent   | *   | Minus | ***   | =                |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |       |   |                  |

|                     |                        |
|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=              |                        |
| X43=                |                        |
| +145=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

OR

|                     |                        |
|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$18=              |                        |
| X86=                |                        |
| +290=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

(Column 1)

(Column 2)

(Column 3)

|             |   |   |       |   |                  |
|-------------|---|---|-------|---|------------------|
| AMENDMENT C |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|             | Total   | *   | Minus | **  | =                |
|             | Independent   | *   | Minus | ***   | =                |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |       |   |                  |

|                     |                        |
|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=              |                        |
| X43=                |                        |
| +145=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

OR

|                     |                        |
|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$18=              |                        |
| X86=                |                        |
| +290=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.